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21 Number of Pages (including this page)

Date: March 8, 2006
Examiner: Hunter B. Lonsberry
To: Art Unit: 2611
Location: United States Patent and Trademark Office
571-273-8300
Fax No.:
From: Attorney: Thomas Bethea Jr. Reg. No. 53,987
Serial No. 09/830,754 Filed: 4/30/2001 Docket No. D02211
Subject:

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MESSAGE:

Enclosed herewith, please find a Response to a Final Office Action for filing in the above-identified application.

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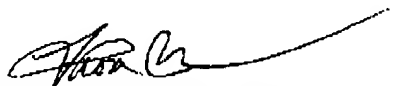
EXAMINER:	Hunter B. Lonsberry
GROUP ART UNIT:	2611
ATTORNEY DOCKET NO.:	D02211

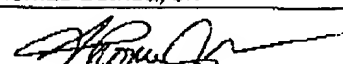
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/830,754	
	Filing Date	April 30, 2001	
	First Named Inventor	Peterka	
	Group Art Unit	2611	
	Examiner Name	Hunter B. Lonsberry	
Total Number of Pages in this Submission	Attorney Docket Number	D02211	

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice) Brief, Reply Brief <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below) <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> RCE <input type="checkbox"/> Copy of Notice to File Missing Parts
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Thomas Bethea, Jr.	Registration No.	53,987
Signature			
Date	February 21, 2006 March 8, 2006		


CERTIFICATE OF TRANSMITTAL/MAILING	
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Typed or printed name	Thomas Bethea, Jr.
Signature	
Date	March 8, 2006

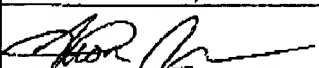
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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Thomas Bethea, Jr.	Registration No.	53,987
Signature			
Date	March 8, 2006 March 8, 2006		

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Typed or printed name	Thomas Bethea, Jr.
Signature	
Date	March 8, 2006

MAR 08 2006

Effective on 12/09/2004		Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)		Application Number	09/830,754			
FEE TRANSMITTAL		Filing Date	April 30, 2001			
For FY 2005		First Named Inventor	Peterka			
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Hunter B. Lonsberry			
		Group Art Unit	2611			
TOTAL AMOUNT OF PAYMENT	(\$) 1520	Attorney Docket No.	D02211			
METHOD OF PAYMENT (check all that apply)						
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____						
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 502117 Deposit Account Name: MOTOROLA, INC.						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee						
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) <input checked="" type="checkbox"/> Credit any overpayments						
under 37 CFR 1.16 and 1.17						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
FILING FEES		SEARCH FEES		EXAMINATION FEES		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0
2. EXCESS CLAIM FEES						
<u>Fee Description</u>					<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent					50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent					200	100
Multiple dependent claims					360	180
<u>Total Claims</u>						
<u>20</u> - 20 or HP=		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
		x	=		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
HP=highest number of total claims paid for, if greater than 20						
<u>Indep. Claims</u>						
<u>2</u> - 3 or HP=		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
		x	=			
HP=highest number of independent claims paid for, if greater than 3						
3. APPLICATION SIZE FEE:						
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.18(s).						
<u>Total Sheets</u>	- 100 =	<u>Extra Sheets</u>	/ 50 =	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
				(round up to a whole number) x		
4. OTHER FEE(S)						
					<u>Fee Paid (\$)</u>	
Petition for 3 Mo Extension of Time					\$1020	
Notice of Appeal					\$500	
SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	Thomas Bethea, Jr.			Registration No.	53,987	Telephone
Signature				Date	3/8/06	